

that should be emulated. This simple act of corporate citizenship is providing coffee consumers the best coffee available while giving the farmers and their families a way to earn a living without having to produce drugs. I also understand that Starbucks and Green Mountain engage in outreach programs for the Latin coffee farmers that allow them to purchase quality coffees for their shops.

In conclusion, if we stand by and allow the crisis to worsen, we are committing ourselves to more drastic action in the medium to long term when the crisis will have spiraled to our further detriment. As the crisis deepens, so do the problems at the U.S. border, such as massive migration and the inflow of more illegal drugs like cocaine and heroin. Although there are efforts under way to address this problem, more action must be taken. I encourage my colleagues to join me in solving this crisis.

IMPLICATIONS OF WAR WITH IRAQ MUST BE EXPLAINED BY ADMINISTRATION

The SPEAKER pro tempore. Pursuant to the order of the House of January 7, 2003, the gentleman from Ohio (Mr. BROWN) is recognized during morning hour debates for 5 minutes.

Mr. BROWN of Ohio. Mr. Speaker, the administration continues to assert rightly that Saddam Hussein is an evil dictator, but the administration fails to explain how a preemptive war is in the best interest of the American people.

On February 25 I introduced House Joint Resolution 24 with the gentleman from California (Mrs. TAUSCHER) and the gentleman from Pennsylvania (Mr. HOEFFEL.) The resolution requires the President to submit a new report to Congress that answers eight specific questions. It includes a sense of Congress clause that requests the President present the report before a public joint session of Congress.

It is our duty in Congress on behalf of the American people to ensure that if the President authorizes military force against Iraq, that he first give Congress a full accounting of the potential cost and the potential consequences.

The two reports submitted to Congress by the administration under requirements of the October resolution have failed to communicate the President's plans for Iraq. The administration in reports included no indication of the potential financial costs of the war and its aftermath, no indication of how weapons of mass destruction will be secured, and no discussion of blowbacks, the CIA term for terrorist actions against the United States.

The second report clearly acknowledges the magnitude of the task of reconstructing and stabilizing Iraq, calling it a massive undertaking. Unfortunately, the report fails to explain how this challenge will be overcome, what level of financial, what level of polit-

ical, what level of military commitment that the administration is willing to make in Iraq after the war.

Before the U.S. initiates a preemptive strike, something we have never done before, without the consensus of the U.N. Security Council and in the absence of a clear, imminent threat to the United States of America, the administration must clearly explain to the American people the short- and long-term implications of attacking Iraq. H.R. 24 asks, and the administration should answer to the American public and to Congress:

Have we exhausted every diplomatic means of disarming Iraq?

Will America be safer from terrorism if we attack Iraq?

How will we deal with the humanitarian crisis that inevitably will follow this war?

How will the war with Iraq affect our already weak economy?

What will reconstruction of Iraq and providing humanitarian assistance to that country cost? And how long will it take, how long will American troops and civilians be stationed there and at what cost?

How will attacking Iraq prevent the proliferation of weapons of mass destruction, when Korea and Libya and other countries, and Iran, for instance, are much further along with nuclear development, we know, than Iraq is?

What will preemptive war do to the stability of the Middle East?

Are we ready to commit to a decade of military troops policing Iraq and the billions of dollars needed to rebuild and stabilize that country and make that country, in the words of the President, into a democracy?

These important questions need to be answered to the American public before President Bush decides preemptively, without U.N. support, to attack another country.

The Washington Post reported today: "The greatest source of concern among senior army leaders is the uncertainty and complexity of the mission in post-war Iraq, which could require U.S. forces," and get this, "to protect Iraq's borders, referee clashes between ethnic and religious groups, ensure civilian security, provide humanitarian relief, secure possible chemical and biological weapon sites, and govern hundreds of towns and villages." Simply put, we could be in the middle of a civil war.

How has the administration responded to these concerns? With silence. There are no legitimate plans for reconstruction that anyone has seen. There are no cost estimates for the conflict or the post-conflict occupation. There are no casualty estimates. These are concerns we must address.

Retired Army Major General William Nash commanded the first peace-keeping operation in the Balkans in 1995. After the Gulf War in 1991, he occupied the area around the Iraqi town of Safwan on the Kuwaiti border almost 2 years ago. He told The Post that during this time his troops dealt with

recurring murders, attempted murders, "ample opportunity," in his words, "for civil disorder," and refugee flows they could never fully fathom. He went on to say that 200,000 U.S. and allied forces will be necessary to stabilize Iraq. Two hundred thousand.

Note that he uses the term "allied forces" in that total. If we continue on the course we are on, there will be few allied forces. Maybe Great Britain, maybe a few Turks, if we pay them enough, maybe a few Spaniards, maybe a few Italians, but overwhelming almost all of those 200,000 will be Americans and we will be footing the bill alone.

The civilian leadership at the Pentagon and the Department of Defense continually refuse to acknowledge the enormity of the challenge in post-conflict Iraq. They respond to inquiries with delay tactics and uncertain estimates.

I am certain of one thing, Mr. Speaker. Any action against Iraq will be difficult, costly, and dangerous if we do not go to the U.N. Security Council.

DOMESTIC VIOLENCE

The SPEAKER pro tempore. Pursuant to the order of the House of January 7, 2003, the gentleman from North Carolina (Mr. COBLE) is recognized during morning hour debates for 5 minutes.

Mr. COBLE. Mr. Speaker, I rise to discuss a very important issue: domestic violence. Last week marked the second annual "Stop Violence Week in Washington." A series of events were held here to encourage men and women to come together to stop violence.

As chairman of the House Judiciary Subcommittee on Crime, Terrorism and Homeland Security, this issue is of particular concern to me. In the 108th Congress, our subcommittee will be tackling important issues relating to violence prevention. The Bureau of Justice statistics estimate that in 1998 about 1 million crimes were committed against persons by their current or former spouses, boyfriends, or girlfriends. These types of crimes are generally referred to as "intimate partner violence," and women are the victims in about 85 percent of the cases. In 1998, in excess of 1,800 murders were committed by persons against their intimate partners.

Although these statistics are shocking, we have made great strides in the last 2 decades at increasing awareness of this problem, which is half the battle. Congress has taken an active role in addressing the problem by authorizing expiring grant programs and establishing new grants to more effectively target violence and abuse. Federal grant dollars are available through the Department of Justice and the Department of Health and Human Services to be used by State and local authorities to assist their communities and schools in fighting violence. For example, grants may be used by local

authorities to aid law enforcement officers and prosecutors in gathering evidence and building cases to bring violent criminals to justice.

These grants also may be used to operate training programs for victim advocates and counselors. Many victims of domestic violence and sexual assault are afraid to retell their stories to friends, family or a counselor. Training people to know how to assist victims of domestic violence is a necessary tool in fighting this epidemic and preventing future abuse.

The 2000 reauthorization of the Violence Against Women Act created new grants to be used to address violence issues on college campuses. It also authorized new grant monies to assist victims of violence with legal concerns and to address violence against the elderly and disabled.

Continuing its commitment to fighting violence and domestic abuse, Congress provided generous monies again this year to the Department of Justice's Office on Violence Against Women.

It is important to recognize the work and dedication as well of groups committed to increasing awareness surrounding domestic violence through education campaigns, intervention, and counseling.

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Mr. Speaker, the National Network to End Domestic Violence, the National Coalition Against Domestic Violence and the National Center for Victims of Crimes are just a few groups that are active in ridding our Nation, our homes, of violence. Many State and local groups across the country also work day to day to prevent violence, aggressively enforce penalties, and counsel victims of violent crimes.

Mr. Speaker, I hope that the Congress will continue to fund outreach and education programs and encourage individuals to work together to change attitudes towards these crimes. It is clear that we are making progress in this area, but we must continue to work together to eradicate violence against women. To all of those working at the local, State and Federal level to eliminate domestic violence and sexual abuse, we express our thanks to them for their selfless efforts and dedication. We hope that our support in the Congress will assist them in this very important battle and fight.

HONORING 100TH ANNIVERSARY OF UNIVERSITY OF PUERTO RICO

The SPEAKER pro tempore (Mr. SIMONS). Pursuant to the order of the House of January 7, 2003, the gentleman from Puerto Rico (Mr. ACEVEDO-VILÁ) is recognized during morning hour debates for 5 minutes.

Mr. ACEVEDO-VILÁ. Mr. Speaker, this week Puerto Rico is celebrating the 100th anniversary of the University of Puerto Rico, our oldest and most prominent higher education institution. One hundred years ago, the Uni-

versity of the Puerto Rico was founded as a training center for teachers, and opened its doors with just 173 students. Since then, the UPR has evolved to become the foremost Hispanic-serving institution in the United States, and one of the leading universities in the Spanish-speaking world. Today the UPR offers 485 academic programs in practically all areas of learning and has a student body of about 70,000 students.

The political, cultural and economic development of Puerto Rico has been closely linked to the UPR. From governors, Supreme Court judges, and NASA engineers to world-renowned authors and poet laureates, all can be found in the UPR alumni. I am proud to be one of thousands of alumni of the UPR that today pay tribute to our alma mater. We look forward to another 100 years of excellence.

Mr. Speaker, congratulations to the people of Puerto Rico, to the University of Puerto Rico, to its students, and to its alumni on its 100-year anniversary.

COVER THE UNINSURED WEEK

The SPEAKER pro tempore. Pursuant to the order of the House of January 7, 2003, the gentleman from Florida (Mr. STEARNS) is recognized during morning hour debates for 5 minutes.

Mr. STEARNS. Mr. Speaker, this week is Cover the Uninsured Week where lawmakers, the media, and our constituents will consider how we can help provide health care coverage for some 35 million Americans. No doubt some will pronounce that the answer lies in a single payer, universal health care coverage program. I say there are better ways. Why? Let us look at countries that do have national health care in place and see its problems.

Let me share with Members a story I read in a February 13 article in the New York Times about the growing lag on the Canadian health care system. According to this article, a Canadian government study shows that 4.3 million Canadians, 18 percent of those who saw a doctor in 2001, had a problem getting tests or surgery done in a timely fashion. Three million could not find a family physician. Canada spends \$86 billion on the health care. Only the United States, Germany and Switzerland spend more as a proportion of economic output, but budget cuts since the early 1990s have impeded efforts to keep health care up to date.

Waiting lines have also increased because an aging population is placing more demands on the system. A study by the Fraser Institute recently concluded that patients across Canada experience waiting times of 16.5 weeks between receiving a referral from a general practitioner and undergoing treatment in 2001-2002, a rate 77 percent longer than in 1993.

Mr. Speaker, can Members imagine an insured American putting up with a wait for 4 months? As Members can imagine, those with the means to seek other options do not, due to what the

Canadians call "line jumping" by the affluent and well-connected.

While the goal of many who recommended socialized health care is egalitarian, equal health services for all, that is exactly what they get, an equally long wait for all. But if a Canadian has money, they just fly south to a private physician in the United States. My State of Florida is notoriously a haven for Canadian snowbirds to winter in and seek medical care.

Last month I had members of various Canadian provincial governments visit me asking how they could work out an arrangement and fee schedule with physicians in Florida to provide services to them.

And to point out another example of the erosion of egalitarian goal that national health care is supposed to provide, there is an ad for an up-scale maternity service in London's Portland Hospital. It points out women do not have to be famous to give birth there, they just need to have money. Deluxe private suites, champagne, and a beauty salon are just among some of the amenities. I thought all English women could receive quality, timely obstetrical care in their assigned hospital. But why then would the Duchess of York and supermodel Jerry Hall choose to have their babies outside the socialized system, because those who can afford to pay want choice, and we should provide nothing less for all Americans.

To seek a legacy in his final years of office, Canada's Prime Minister Jean Chretien has agreed to spend \$9 billion more over the next 3 years. Fortunately for Canadians, the system's shortfalls have opened the way for tentative but growing movements toward privately managed medical services.

Let us resolve today to promote choice and opportunity for the uninsured to obtain the health care plan that works best for them. One of the major ways is to institute a tax parity into health insurance. The 90 percent of us who receive our health insurance through our employers are receiving a substantial tax benefit. We should extend this to those in the individual market also.

When this Congress convened on January 7, I introduced my bill, H.R. 198, that would allow any tax filer to deduct 100 percent of the cost of their health insurance as well as non-reimbursed prescription drugs. Currently, only the self-employed can deduct 100 percent, but what about the unemployed or the retired? H.R. 198 would help them also. Likewise, many of my colleagues have introduced legislation to provide tax credits for Americans to use for purchasing health care. These are all ways we can help cover the uninsured and enable them to purchase the health insurance of their choice.

LONG LINES MAR CANADA'S LOW-COST HEALTH CARE

(By Clifford Krauss)

TORONTO, Feb. 11—During a routine self-examination last May, Shirley Magee found